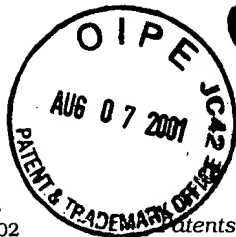


3728



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August 3, 2001

Box Non-Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

Re: Patent Application of: TINA MARIE NIELSEN, et al.
Serial No. 09/591,539
Filed: June 9, 2000
Group Art Unit: 3728

Sir:

Enclosed are the following papers:

1. Fee Determination Record form PTO/SB/06; no additional fee is required.
2. First Amendment
3. Postcard receipt

Respectfully submitted,

Robert E. Howard

Enclosures

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box Non-Fee Amendment, Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: August 3, 2001.

Robert E. Howard

Date: 8/3/01

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PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number 09/591,539	
CLAIMS AS FILED - PART I						
(Column 1)		(Column 2)		SMALL ENTITY		OR
OTHER THAN SMALL ENTITY						
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE	
BASIC (37 CFR 1.16(a))					\$ _____	OR
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*		x \$ _____ =		OR
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*		x _____ =		OR
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ _____ =		OR
TOTAL						OR
TOTAL						OR
* If the difference in column 1 is less than zero, enter "0" in column 2.						
CLAIMS AS AMENDED - PART II						
(Column 1)		(Column 2)		SMALL ENTITY		OR
OTHER THAN SMALL ENTITY						
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))	* 14	Minus	** 20	=	0	OR
Independent (37 CFR 1.16(b))	* 2	Minus	*** 3	=	0	OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ _____ =		OR
TOTAL				0		OR
TOTAL				0		OR
(Column 1) (Column 2) (Column 3)						
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))	*	Minus	**	=		OR
Independent (37 CFR 1.16(b))	*	Minus	***	=		OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ _____ =		OR
TOTAL						OR
TOTAL						OR
(Column 1) (Column 2) (Column 3)						
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	
Total (37 CFR 1.16(c))	*	Minus	**	=		OR
Independent (37 CFR 1.16(b))	*	Minus	***	=		OR
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ _____ =		OR
TOTAL						OR
TOTAL						OR

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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